SOLDIERS' HOME IN HOLYOKE WALTER ZARICHAK SCHOLARSHIP APPLICATION

110 Cherry Street, Holyoke, Massachusetts 01040

THE FOLLOWING MUST BE RECEIVED NO LATER THAN: May 8, 2015

- Application
- □ A letter of recommendation addressing applicant's character and ability (excluding relatives)
- □ An acceptance letter from the college you will be attending or proof of enrollment
- In letter form, state your reason for applying (adding anything you feel may affect consideration of your application)
- □ Submit all of the above to: Magaly King or Lynn Vieau, SOLDIERS' HOME IN HOLYOKE, 110 CHERRY STREET, HOLYOKE, MA 01040

Name: First Middle	Last		Date of Birth	Telephone No.		Date of Application		
Present Address: Number and Street	City			Code Do you live with your parents?		Yes	No	
Father/Guardian's Name:			Mother's/Guardian's Name:					
Eather/Quardien's equipation and place of employment		Mother's/Guardian's occupation and place of employment:						
Father/Guardian's occupation and place of employment:								
Number and ages of dependent children in family:			Date of appointment as guardian/Court Name & Case Number					
High School Students – please complete this section:								
High School attending:		Proposed I	Proposed Major:		Grade Point Average:			
		2 years 4 years			ears			
Acceptance Letter Attached:	What career do you wish to pursue?							
College Students – please complete this section:								
College attending:		Major:			Grade Point Average:			
What career do you wish to pursue?		Years com	Years completed:		Number of Years:			
					2 years 4 years			
Other:								
Extra Curricular Activities, Clubs, etc:								
Awards, Honors:								
Employment:								
Name & Address of Employer	Service Date (mm/yyyy) From: To:	Hours Worked Per Week	Worked Nature of work p		Re	Reason for leaving:		
1)								
2)								
		1						

Signature of Applicant

FORM: SCHOLARSHIP APPLICATION